## RECEIVED

Appendix C

## Supplemental Statement

OCT 28 222

## Candidates, Political Action, Political Party or Ballot Questions Committees State of South Dakota

State law requires that if any candidate committee for statewide office (legislative candidates do not file supplemental statements), political action committee, ballot question committee, or political party receives a contribution of five hundred dollars or more within the fourteen days immediately prior to an election for which

a campaign finance disclosure for	m may be filed, a supplemental statement shan. If the contribution is received on or after lamitted	all be filed within f	orty-eight
•	Communities Ballot Question Committee		44
You must list the name, street add contribution of \$500 or more.	ress, city and state of each contributor, the ar	mount and date of	each
Name of Contributor	Street Address, City and State	Amount of Contribution	Date of Contribution
Rapid City Regional Hospital	353 Fairmont Boulevard, Rapid City SD	\$8,500.00	10/28/2010
VERIFICATION OF PERSON M  David R. He	ewett (print name legibly	), certify that I hav	ve examined
failure to timely file any statement	nowledge and belief it is true, correct and correct amendment, or correction required subjects lars per day for each day that the statement required.	s the treasurer respond	onsible for
	Treasurer Signaturé		
	Submit Supplemental Statement to: Secretary of State, Elections Department 500 East Capitol Ave., Ste 204 Pierre, SD 57501 or fax to 605-773-6580 or email to kea.warne@state.sd.us	, n	
Fax and email images must contain	n the signature(s) and the original must be fi	led in our office wi	thin one week

following the date the fax/email was received.

Filed this

New 7-1-09

## Ballot Question Contribution Statement State of South Dakota

Complete one of the following three sections that pertain to your organization.

Section 1	
Check here if your organizations South Dakota Secretary of State.	ation is filed as a domestic or foreign entity in good standing with the Office of
Full Name of Organization: Rapi	id City Regional Hospital
Date: October 28, 2010 Signatu	are:
******	************
Section 2	
domestic of foleigh sufffy III 6000	n that makes a contribution to a ballot question committee that is not filed as a standing with the South Dakota Secretary of States Office, to include Section 2 th any contribution to a ballot question committee.
Full Name of Organization:	
	w the Organization is Incorporated or Organized:
	's Principle Office:
	Signature:
	**************
Tollication of Tolerall cliffty III 8000 ;	that makes a contribution to a ballot question committee which is not filed as a standing with the South Dakota Secretary of States Office and is not eligible to ection 3 of this informational statement with any contribution to a ballot
Full Name of Organization:	
	's Principle Office: